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APPLICANTS

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**** CONTINUING DATA *******

This application is a CON of 09/131,019 08/07/1998 ABN
 which claims benefit of 60/055,221 08/11/1997

**** FOREIGN APPLICATIONS *********** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****
 04/27/2001

Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Verified and /BLESSING M FUBARA/ Acknowledged _____	<input type="checkbox"/> Met after Allowance Initials _____	CT	1	38	5
Examiner's Signature _____					

ADDRESS

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TITLE

SOLID PHARMACEUTICAL DISPERSIONS WITH ENHANCED BIOAVAILABILITY

FILING FEE RECEIVED 3384	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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